

"PATENT"

**AMENDMENT TRANSMITTAL FORM**

In re application of: Lisa S. Boffa, et al. ) Before the Examiner  
 U. S. Serial No.: 09/941,881 [819101] ) James W. Pasterczyk  
 Filed: August 28, 2001 )  
 For: MULTI-DENTATE LATE TRANSITION METAL ) Confirmation Number: 7839  
      CATALYST COMPLEXES AND POLYMERIZA- ) Group Art Unit: 1755  
      TION METHODS USING THOSE COMPLEXES ) Family Number: P2001J056

Commissioner for Patents  
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<b>CERTIFICATION OF FACSIMILE TRANSMISSION</b>		
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KATHLEEN A. KUNA Name of person signing certification	<i>Kathleen A. Kuna</i> Signature	MAY 27, 2004 Date

Transmittal herewith is an amendment/response in the above-identified application.

Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent, required. The fee for this extension of time is calculated to be \$ \_\_\_\_\_ to extend the time for filing this response until \_\_\_\_\_.

The fee for any changes in number of claims has been calculated as shown below.

CLAIMS AS AMENDED						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7)
Total Claims	*	1	Minus	** 44	x 18.00	—
Indep. Claims	*	- 1	Minus	*** 4	x 86.00	—
MULTIPLE DEPENDENT CLAIM FEE						\$290.00
FEE FOR CLAIM CHANGES						—

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Higher Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The total fee for this AMENDMENT UNDER 37 CFR § 1.111, including claim changes and any extension of time is calculated to be \$ 0.

Charge \$ 0 to Deposit Account No. 05-1330.

The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to Deposit Account No. 05-1330. A duplicate copy of this Form is enclosed.

May 27, 2004

DATE OF SIGNATURE

Post Office Address: [to which correspondence is to be sent]  
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Pursuant to 37 CFR 1.34(a)

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**Fax Notes:**

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